

Please write clearly and ensure all information given is accurate using correct spelling etc. This information will be used for the Baptism Certificate and for the parish register.

Iona/Maryknoll & Koo Wee Rup Parishes in Partnership Baptism Registration Form

Rite of Welcome **Date:** _____ **Time of Mass** _____ **at**

Please circle: Iona, Maryknoll, Nar Nar Goon, Koo Wee Rup, Lang Lang.
St Joseph's Holy Family St James St John's St Mary's

Baptism Date: _____ **Parish Church:** _____ **Time:** _____

Child's Full Name: _____

Date of Birth: _____ **Sex** _____

Email Address: _____

Parents Address: _____

Phone: _____

Father's Full Name: _____ **Religion** _____

Mother's Full Name: _____ **Religion** _____

Mother's Maiden Name: _____

(Name of Church, Venue etc)

Place of Marriage: _____

Names of Godparents: (At least one must be a practicing Catholic and over the age of 16 years.)

1. _____ **Religion** _____ 2. _____ **Religion** _____

3. _____ **Religion** _____ 4. _____ **Religion** _____

Other Children: _____ **Date of Birth:** _____

_____ **Date of Birth:** _____

_____ **Date of Birth:** _____

Baptism Information Session Attended? **Month** _____ **Yes** **No**

Priest:-----

Form to be returned to Parish Office please via email, thank you. ionamaryknoll@cdsale.org.au